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Image# 14978095332

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	7 (1	For An A	uthori	zed Comr	nittee			Office U	lse Only	
NAME OF COMMITTEE (in		YPE OR PRINT	<b>▼</b>		mple: If typing r the lines.	g, type	12FE4M5	)		
KOLLER FOR	CONGRE	SS LLC	1 1 1	1 1 1					<u> </u>	
ADDRESS (number ar	I	PO BOX 3683								
•										
Check if did than previous reported. (A	usly <sub> </sub>	OCALA					FL _	34478		
2. <b>FEC IDENTIFIC</b>	CATION NUM	IBER ▼		CITY			STATE		ZIP CODE STATE ▼ D	DISTRICT
C C0055244	18			S THIS REPORT	NEW (N)	OR	X AMENE (A)	DED	FL	11
4. TYPE OF RE	PORT (Choos	se One)	(b) 12	2-Day <b>DRF</b> -	Election Repo	rt for the				
(a) Quarterly R	eports:		(D) 12	z-Day FILE-			_			
April 15	Quarterly Rep	oort (Q1)		Ш	Primary (12P)		General (1	12G)	Runof	f (12R)
					Convention (	12C)	Special (1	2S)		
July 15	Quarterly Rep	ort (Q2)			M M /	D D	V V V V V		in the	
× Octobe	r 15 Quarterly	Report (Q3)	E	Election on					State of	
January	31 Year-End	Report (YE)	(c) 30	0-Day <b>POS</b> 1	-Election Rep	ort for the	 :			
					General (30G	)	Runoff (30	DR)	Speci	al (30S)
Termina	ition Report (T	ER)	E	Election on	M M /	D D /	Y " Y " Y " Y	]	in the State of	
5. Covering Period	M M M 08	07		)14	through	M 09	30		)14	
I certify that I have e	examined this	Report and to	the bes	st of my kno	owledge and k	pelief it is t	rue, correct and	d compl	ete.	
Type or Print Name	of Treasurer	Victoria Ellen	Boyne							
Signature of Treasure	er <u>Victoria</u>	ı Ellen Boyne			[Electronically I	Filed]	Date 10	/ D	08 / Y Y 20	014 Y
NOTE: Submission of	false, erroneou	us, or incomple	te inforn	nation may s	ubject the per	son signing	this Report to t	he penal	ties of 2 U.S.C	. §437g.
Office								FF.	C EODA (	
Use Only									C FORM (evised 02/2003)	<b>'</b>

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

#### **KOLLER FOR CONGRESS LLC**

80 09 30 2014 07 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 18767.03 44208.57 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 18767.03 44208.57 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 13292.12 45696.82 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 13292.12 45696.82 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 10881.52 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 31658.17 Schedule C and/or Schedule D).....

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

#### KOLLER FOR CONGRESS LLC

08 07 09 2014 2014 30 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 2140.12 3614.45 (i) Itemized (use Schedule A)..... 5320.41 11005.60 (ii) Unitemized ..... (iii) TOTAL of contributions 7460.53 14620.05 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 11306.50 29588.52 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 18767.03 44208.57 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 12280.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 12280.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 1245.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 18767.03 57733.57 (Carry Total to Line 24, page 4).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	13292.12	45696.82
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed		
	by the Candidate	0.00	0.00
	(b) Of All Other Loans(c) TOTAL LOAN REPAYMENTS	0.00	0.00
	(add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:  (a) Individuals/Persons Other		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	1155.23
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	13292.12	46852.05
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	5406.61
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	18767.03
25.	SUBTOTAL (add Line 23 and Line 24)		24173.64
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	13292.12
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		10881.52

Use separate schedule(s) for each category of the Detailed Summary Page

FC	FOR LINE NUMBER:			PAGE	:	5	OF	25
(ch	neck only	one)						
	X 11a	11b		11c		11	d	
	12	13a		13b		14		15

Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LL	С	
<u> </u>	Full Name (Last, First, Middle Initial) Kamesh Aiyer		Date of Receipt
Α.	Mailing Address 11 Magazine Street		09 30 2014
	City Cambridge	State Zip Code MA 02139	Transaction ID : SA11AI.4821
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer Unknown	Occupation Sales Consultant	240.12 250 Act Blue Donation
	Receipt For: 2014  Primary General  Other (specify)	Election Cycle-to-Date	_
— В.	Full Name (Last, First, Middle Initial) Victoria Ellen Boyne		Date of Receipt
	Mailing Address 3821 se 22 place		09 30 2014
	City ocala	State Zip Code FL 34471	Transaction ID : SA11AI.4825
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer DST	Occupation Social Services	200.00
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date	_
_	Full Name (Last, First, Middle Initial) Elizabeth Cocchini		Date of Receipt
C.	Mailing Address 2102 Alfredo Ave		09 15 2014
	City The Villages	State Zip Code FL 32159	Transaction ID : SA11AI.4764
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired	1500.00
	Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date	
s	UBTOTAL of Receipts This Page (optional)		1940.12
Т	OTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE I	e number:     [			PAGE	:	ь	OF	25
(chec	k only	or	ne)						
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	12		13a		13b		14		15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

		e name and address of any political committee	to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC		
<u> </u>	Full Name (Last, First, Middle Initial) Norman Davis		Date of Receipt
	Mailing Address 444 Corbett Drive		09 12 2014
	City	State Zip Code	Transaction ID : SA11AI.4791
	The Villages	FL 32162	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired	100.00
	Receipt For: 2014 Primary Signal General Other (specify)	Election Cycle-to-Date 300.00	
В.	Full Name (Last, First, Middle Initial) Ed & Lyn Margolis		Date of Receipt
	Mailing Address 2114 Alfredo Ave		09 19 2014
	City The Villages	State Zip Code FL 32159	Transaction ID : SA11AI.4809
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer	Occupation	100.00
	Retired Receipt For: 2014	Retired  Election Cycle-to-Date	
	Primary General Other (specify)	300.00	
_	Full Name (Last, First, Middle Initial)		Date of Receipt
C.	Mailing Address		M M / D D / Y Y Y Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
5	SUBTOTAL of Receipts This Page (optional)		200.00
Г	OTAL This Period (last page this line number		2140.12

	FOR LINE NUMBER:	PAGE	7 OF	25
Use separate schedule(s)	(check only one)			
for each category of the	11a 11b	11c	<b>X</b> 11d	
Detailed Summary Page	12 13a	13b	14	15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) DAVID C KOLLER Date of Receipt Mailing Address 3821 SE 22 PLACE 80 2014 07 City State Zip Code Transaction ID: SA11D.4889 FL 34471 **OCALA** FEC ID number of contributing Amount of Each Receipt this Period H4FL11071 federal political committee. 554.92 Name of Employer Occupation DST Social Services Receipt For: 2014 Election Cycle-to-Date Primary X General 32856.30 Other (specify) Full Name (Last, First, Middle Initial) DAVID C KOLLER Date of Receipt Mailing Address 3821 SE 22 PLACE 80 2014 Citv State Zip Code Transaction ID: SA11D.4890 **OCALA** FL 34471 FEC ID number of contributing Amount of Each Receipt this Period С H4FL11071 federal political committee. 1000.00 Name of Employer Occupation DST Social Services Receipt For: 2014 Election Cycle-to-Date M General Primary 33856.30 Other (specify) Full Name (Last, First, Middle Initial) DAVID C KOLLER Date of Receipt Mailing Address 3821 SE 22 PLACE 2014 11 City State Zip Code Transaction ID: SA11D.4891 FL **OCALA** 34471 FEC ID number of contributing С H4FL11071 Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation DST Social Services Receipt For: 2014 Election Cycle-to-Date X General Primary 33956.30 Other (specify) 1654.92 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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Detailed Summary Page 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) DAVID C KOLLER Date of Receipt Mailing Address 3821 SE 22 PLACE 80 2014 18 City State Zip Code Transaction ID: SA11D.4892 FL 34471 **OCALA** FEC ID number of contributing Amount of Each Receipt this Period H4FL11071 federal political committee. 1565.51 Name of Employer Occupation DST Social Services Receipt For: 2014 Election Cycle-to-Date Primary X General 35521.81 Other (specify) Full Name (Last, First, Middle Initial) DAVID C KOLLER Date of Receipt Mailing Address 3821 SE 22 PLACE 18 2014 City State Zip Code Transaction ID: SA11D.4893 **OCALA** FL 34471 FEC ID number of contributing C H4FL11071 Amount of Each Receipt this Period federal political committee. 631.00 Name of Employer Occupation DST Social Services Receipt For: 2014 Election Cycle-to-Date Primary General 36152.81 Other (specify) Runoff Full Name (Last, First, Middle Initial) C

DAVID C KOLLER		Date of Receipt
Mailing Address 3821 SE 22 PLACE		08 21 2014
City OCALA	State Zip Code FL 34471	Transaction ID : SA11D.4894
FEC ID number of contributing federal political committee.	C H4FL11071	Amount of Each Receipt this Period
Name of Employer DST	Occupation Social Services	1500.00
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 37652.81	
SUBTOTAL of Receipts This Page (option	al)	3696.51
TOTAL This Period (last page this line nur	mber only)	
		FEC Schedule A (Form 3) (Revised 02/2009)

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Any information copied from such Reports and sor for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC	С								
Full Name (Last, First, Middle Initial) DAVID C KOLLER					Date of	Receipt			
Mailing Address 3821 SE 22 PLACE					08	28		2014	Y
City OCALA	State FL	Zip Code 34471	9	т	ransacti	ion ID : SA	A11D.4895		
FEC ID number of contributing federal political committee.	С н4	FL11071			Amount	of Each	Receipt this		
Name of Employer DST	Occupation Social Serv				-	,		2494.4	41
Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date	40147.22						
Full Name (Last, First, Middle Initial)  DAVID C KOLLER					Date of	Receipt			
Mailing Address 3821 SE 22 PLACE					M M M	08		2014	Y
City OCALA	State FL	Zip Code 34471	<del></del>		ransacti	on ID : SA	A11D.4896		
FEC ID number of contributing federal political committee.	C H4	FL11071			Amount	of Each	Receipt this	s Period	00
Name of Employer DST	Occupation Social Serv					-	-	3000.0	00
Receipt For: 2014  Primary General  Other (specify)	Election C	ycle-to-Date	43147.22						
Full Name (Last, First, Middle Initial)  DAVID C KOLLER					Date of	Receipt			
Mailing Address 3821 SE 22 PLACE	Ctata	7:- 0			09	/ D 19		2014	Y
City OCALA	State FL	Zip Code 34471	=	1	ransact	ion ID : S	A11D.4897		
FEC ID number of contributing federal political committee.	С н4	FL11071			Amount	of Each	Receipt this	s Period	_
Name of Employer DST	Occupation Social Serv							200.	00
Receipt For: 2014 Primary Seneral Other (specify)	Election C	ycle-to-Date	43347.22						
SUBTOTAL of Receipts This Page (optional)								5694.4	11
TOTAL This Period (last page this line number	only)					,			

	FOR LINE NUMBER:	PAGE 10 OF 25
Use separate schedule(s)	(check only one)	
for each category of the	11a 11b	11c X 11d
Detailed Summary Page	12 13a	13b 14 15

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	FOR LINE	NUMBE	I	PAGE	11	OF	25	
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for each category of the Detailed Summary Page	×	17		18		19a		19k
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) Date of Disbursement Christensen And Associates 2014 Mailing Address 2009 209 Pennsylvania Ave. SE 09 09 City State Zip Code Amount of Each Disbursement this Period DC Washington 20003 Purpose of Disbursement 3000.00 Final Fundrasing Consultant payment Transaction ID: SB17.4967 Candidate Name Category/ Type [MEMO ITEM] 2014 Office Sought: House Disbursement For: Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) **Enterprise Rental** Date of Disbursement Mailing Address 448 SW 10TH ST 09 30 2014 City State Zip Code Amount of Each Disbursement this Period FL 34471 ocala Purpose of Disbursement 309.81 Vehicle Rental to pick up signs Transaction ID: SB17.4962 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Hernando County DEC Mailing Address 3432 Deltona Blvd 08 28 2014 City State Zip Code Amount of Each Disbursement this Period Spring Hill FL 34608 Purpose of Disbursement 400.00 Wage War in the Park Transaction ID : SB17.4929 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House X General Senate Primary President Other (specify) State: District: 709.81 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

**PAGE** 12 25 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) Hernando County DEC Date of Disbursement 2014 Mailing Address 3432 Deltona Blvd 09 24 City State Zip Code Amount of Each Disbursement this Period FΙ Spring Hill 34608 Purpose of Disbursement 101.00 Phones Transaction ID: SB17.4959 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House **X** General Senate Primary Other (specify) President District: Full Name (Last, First, Middle Initial) **Hess Gas Station** Date of Disbursement Mailing Address 4707 Commercial Way 09 2014 City State Zip Code Amount of Each Disbursement this Period FL 34606 Spring Hill 33.05 Purpose of Disbursement Transaction ID: SB17.4951 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Homy Tel Inc Mailing Address 482 West San Ysidro Blvd #732 08 07 2014 City State Zip Code Amount of Each Disbursement this Period San Diego CA 92173 500.00 Purpose of Disbursement Robocalls Transaction ID : SB17.4900 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House X General Senate Primary President Other (specify) State: District: 634.05 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

	Detailed	l Summary	Page	20a 20b 20c 21
	ly information copied from such Reports and Statements may not be for commercial purposes, other than using the name and address of			
$\rangle$	NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC			
	Full Name (Last, First, Middle Initial)			B + (B) +
۹.	Walt Huston			Date of Disbursement
	Mailing Address 9269 Marler Road			09 18 2014
	City State Zip C			Amount of Each Disbursement this Period
	Spring Hill FL 3460	08		217.07
	Purpose of Disbursement Office Consultant			217.97 Transaction ID : SB17.4953
	Candidate Name		Category/ Type	
	President Other (specify)	General		
	State: District: Full Name (Last, First, Middle Initial)			
3.	William Lloyd			Date of Disbursement
	Mailing Address 4037 NW Blitchton Road Apt 89B			08
	City State Zip C	Code		Amount of Each Disbursement this Period
	Ocala FL 3447	75		
	Purpose of Disbursement Office Consulatant			200.00 Transaction ID : SB17.4903
	Candidate Name		Category/ Type	
_	Office Sought:  House Senate President  Disbursement For: 2014  Primary Other (specify)  State:	General		
	Full Name (Last, First, Middle Initial)			
Э.	William Lloyd			Date of Disbursement
	Mailing Address 4037 NW Blitchton Road Apt 89B			08 / D D / Y Y Y Y Y Y 2014
	City State Zip Code			Amount of Each Disbursement this Period
	Ocala FL 34475			
	Purpose of Disbursement Printer Ink Remimbursmant			84.17
	Candidate Name		Category/ Type	Transaction ID : SB17.4905
	Office Sought:    House   Disbursement For: 2014     Senate   Primary   Other (specify)     State: District:	General		
s	UBTOTAL of Disbursements This Page (optional)			502.14
Т	OTAL This Period (last page this line number only)			

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 25 (check only one)

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	y information copied from such Reports and Statements may not be sold or us for commercial purposes, other than using the name and address of any politic		
	NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC		
Α.	Full Name (Last, First, Middle Initial)  William Lloyd  Mailing Address 4037 NW Blitchton Road Apt 89B		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code Ocala FL 34475  Purpose of Disbursement Office Consultanting		Amount of Each Disbursement this Period  221.65  Transaction ID: SB17.4933
	Candidate Name  Office Sought:  Senate President  Disbursement For: 2014 Primary Other (specify)  State:  District:	Category/ Type	
В.	Full Name (Last, First, Middle Initial)  William Lloyd  Mailing Address 4037 NW Blitchton Road Apt 89B		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code Ocala FL 34475  Purpose of Disbursement Office Conultanting  Candidate Name  Office Sought: House Disbursement For: 2014	Category/ Type	Amount of Each Disbursement this Period 300.00  Transaction ID: SB17.4944
	Senate President Other (specify) State:		
C.	Full Name (Last, First, Middle Initial)  William Lloyd  Mailing Address 4037 NW Blitchton Road Apt 89B		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code Ocala FL 34475  Purpose of Disbursement		Amount of Each Disbursement this Period  85.00  Transaction ID: SB17.4949
	Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District:	Category/ Type	
sı	UBTOTAL of Disbursements This Page (optional)		606.65
T	OTAL This Period (last page this line number only)		

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for each category of the Detailed Summary Page	×	17		18		19a		] 19b
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) Date of Disbursement A. William Lloyd 2014 Mailing Address 4037 NW Blitchton Road Apt 89B 09 19 City State Zip Code Amount of Each Disbursement this Period FΙ Ocala 34475 Purpose of Disbursement 200.00 Office Conultant Transaction ID: SB17.4955 Candidate Name Category/ Type 2014 Office Sought: House Disbursement For: Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) William Lloyd Date of Disbursement Mailing Address 4037 NW Blitchton Road Apt 89B 09 25 2014 City State Zip Code Amount of Each Disbursement this Period FL 34475 Ocala 200.00 Purpose of Disbursement Office Consultanting Transaction ID: SB17.4960 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. Marion County DEC Date of Disbursement Mailing Address 601 SW 1st Avenue 08 2014 18 City State Zip Code Amount of Each Disbursement this Period Ocala FL 34471 600.00 Purpose of Disbursement Ad & Committee Dinner Proud to Be a Democrat Transaction ID: SB17.4908 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House X General Senate Primary President Other (specify) State: District: 1000.00 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

		<u> </u>		20a	20b	20c	21
	y information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any pol						
<u> </u>		oar committee	5 10 30110	501111101	410110 IIUIII	Caori Collilli	
$\rangle$	NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC						
	Full Name (Last, First, Middle Initial)						
۹.	Nation Builder		Dat	e of Disbu	ursement		
	Mailing Address 448 S Hill St, #200			08 /	25	2014	Y
	City State Zip Code		Λ	ount of F	ach Dick	omont this D	Poriod
	Los Angeles CA 90013		Am	ount of Ea	acii disdurs	ement this P	eriod
	Purpose of Disbursement List Serve		Trans	action ID	: SB17.492	69.0 <b>4</b>	00
	Candidate Name	Category/ Type	ITAIIS	action ib	. 00 17.432	<del>-</del>	
	Office Sought:    House   Disbursement For: 2014     Senate   Primary   General     Other (specify)     State: District:	,					
	Full Name (Last, First, Middle Initial)						
3.	Nation Builder			e of Disbu		Y " Y " Y "	v
	Mailing Address 448 S Hill St, #200			м / 09	25	2014	Y
	City State Zip Code		Amo	ount of Ea	ach Disburs	ement this P	eriod
	Los Angeles CA 90013	1					
	Purpose of Disbursement List Serve list		Trans	action ID	: SB17.496	69. 1	UU
	Candidate Name	Category/ Type					
	Office Sought:  House Senate President  Disbursement For: 2014  Primary Other (specify)  State:						
	Full Name (Last, First, Middle Initial)						
Э.	OAI Inc		Dat	e of Disbu	ursement		
	Mailing Address 4545 West Hillsborough Ave		М	M /	21	2014	Y
	City State Zip Code		Ame	ount of Ea	ach Disburs	ement this P	eriod
	Tampa FL 33614	1				1070	e E
	Purpose of Disbursement Political Signage			antian IS	. CD47 404	1278.	00
	Candidate Name	Category/ Type	Irans	action ID	: SB17.4917	,	
	Office Sought:    House   Disbursement For: 2014     Senate   Primary   General     Other (specify)     State: District:						
s	UBTOTAL of Disbursements This Page (optional)			,		1416.	65
Т	OTAL This Period (last page this line number only)						

	FOR LINE NUMBER:			F	PAGE	17	OF	25
Use separate schedule(s)	(check on	ly one)						
for each category of the Detailed Summary Page	X	17		18		19a		19k
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) A. OAI Inc Date of Disbursement 2014 Mailing Address 4545 West Hillsborough Ave 08 29 City State Zip Code Amount of Each Disbursement this Period FΙ Tampa 33614 Purpose of Disbursement 628.80 Poltical Signage Transaction ID: SB17.4932 Candidate Name Category/ Type 2014 Office Sought: House Disbursement For: Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) OAI Inc Date of Disbursement Mailing Address 4545 West Hillsborough Ave 09 80 2014 City State Zip Code Amount of Each Disbursement this Period FL 33614 Tampa 171.99 Purpose of Disbursement Politcal Napkins Transaction ID: SB17.4945 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. OAI Inc Mailing Address 4545 West Hillsborough Ave 09 2014 18 City Zip Code State Amount of Each Disbursement this Period 33614 Tampa FL Purpose of Disbursement Political Signs 2174.78 Transaction ID : SB17.4952 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House X General Senate Primary President Other (specify) State: District: 2975.57 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

PAGE 18 OF 25 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

	y information copied from such Reports and Statements may not be sold or use for commercial purposes, other than using the name and address of any political		
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC		
	Full Name (Last, First, Middle Initial)		
۹.	Terry Ogden		Date of Disbursement
	Mailing Address 3363 Cedar Crest Loop		09 / 09 / 2014
	City         State         Zip Code           Spring Hill         FL         34609		Amount of Each Disbursement this Period
	Purpose of Disbursement Website hosting		450.00
	Candidate Name	Category/ Type	Transaction ID : SB17.4947
	Office Sought:  House Senate President  Other (specify)  Disbursement For: 2014  Primary Other (specify)	1340	
	State: District:   Full Name (Last, First, Middle Initial)		
В.	Quick King		Date of Disbursement
	Mailing Address 13051 N US HIGHWAY 27		08 11 2014
	City State Zip Code		Amount of Each Disbursement this Period
	Ocala FM 34480		70.50
	Purpose of Disbursement Fuel		70.56
	Candidate Name	Category/ Type	Transaction ID : SB17.4904
	Office Sought:  House Senate President  State:  Disbursement For: 2014 Primary Other (specify)		
	Full Name (Last, First, Middle Initial)		
	Quick King		Date of Disbursement
	Mailing Address 13051 N US HIGHWAY 27		08 22 7 2014
	City State Zip Code		Amount of Each Disbursement this Period
	Ocala FM 34480 Purpose of Disbursement		37.07
	Fuel Fuel		,
		Category/ Type	Transaction ID : SB17.4919
	Office Sought:    House		
SI	UBTOTAL of Disbursements This Page (optional)		557.63
	OTAL This Period (last page this line number only)		

	FOR LINE NUMBER:			F	PAGE	19	OF	25
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	X	17		18		19a		19k
Detailed Summary Page		20a		20b		20c		21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) Date of Disbursement A. Quick King 2014 Mailing Address 13051 N US HIGHWAY 27 09 09 City State Zip Code Amount of Each Disbursement this Period FΜ Ocala 34480 Purpose of Disbursement 36.01 Transaction ID: SB17.4948 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Shell Service Station Date of Disbursement Mailing Address 11091 Spring Hill Drive 09 15 2014 City State Zip Code Amount of Each Disbursement this Period FL 34609 Spring Hill 62.18 Purpose of Disbursement Transaction ID: SB17.4950 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. The Blue Deal Mailing Address P.O. Box 50 08 2014 City State Zip Code Amount of Each Disbursement this Period 22003 Annandale VA Purpose of Disbursement 2051.37 Politcal Promo Transaction ID : SB17.4920 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House X General Senate Primary President Other (specify) State: District: 2149.56 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

**PAGE** 20 25 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC Full Name (Last, First, Middle Initial) Date of Disbursement Laura Williams 2014 Mailing Address 2855 SE 58th st 08 80 City State Zip Code Amount of Each Disbursement this Period FΙ Ocla 34475 Purpose of Disbursement 800.00 Social Media Advertsing Transaction ID: SB17.4902 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Laura Williams Date of Disbursement Mailing Address 2855 SE 58th st 09 80 2014 City State Zip Code Amount of Each Disbursement this Period FL 34475 Ocla 800.00 Purpose of Disbursement Socail Media Transaction ID: SB17.4943 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City Zip Code State Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 1600.00 SUBTOTAL of Disbursements This Page (optional)..... 12152.06

TOTAL This Period (last page this line number only).....

# SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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OANS			Detailed Summary Pa		(check only one)	>	<b>\</b>	13a 13b
AME OF COMMITTEE (In Full)			Transa	ction	ID : SC/10.4289			
KOLLER FOR CONGR	ESS LLC							
LOAN SOURCE Full Name	(Last, First, Midd	e Initial)		Ele	ection: 2014			
DAVID C KOLLER				X	Primary General			
Mailing Address 3821 SE 22 PLACE					Other (specify) ▼			
City	S	tate ZIP Cod	de					
OCALA		FL 34471						
Original Amount of Loan		Cumulative Payment To	Date Bal	ance	Outstanding at Close of	of Thi	s P	'eriod
, ,	1000.00		0.00	_		1000.	00	
TERMS  Date Incurred		Date Due	Interest Ra	te	Seci	ıred:		
M 11 M / D 25 D / Y	Ž013 Y	M / D D / Y	0.0	0	% (apr)	Yes	X	No
List All Endorsers or Guara		Loan Source						
1. Full Name (Last, First, M	liddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	_		_	_	
City	State	ZIP Code	Guaranteed Outstanding:	7		_	J	
2. Full Name (Last, First, Mid	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount Guaranteed	_		_	<u> </u>	
City	State	ZIP Code	Outstanding:	7	7	_	1	
3. Full Name (Last, First, Mic	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	-		_		
City	State	ZIP Code	Guaranteed Outstanding:	7			_	
4. Full Name (Last, First, Mic	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	-		_	7	
City	State	ZIP Code	Guaranteed Outstanding:	7	7	_	_	
SUBTOTALS This Period This I	Page (optional)			_	7	1000.	00	
TOTALS This Period (last page	in this line only).		······		7		_	
Carry outstanding balance only	v to LINE 3 Scher	dule D. for this line If a	no Schedule D. carry for	ward	to appropriate line of	Sun	nm:	arv

# SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

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for each category of the **X** 13a **LOANS** (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4314 NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary DAVID C KOLLER General Mailing Address Other (specify)  $\blacktriangledown$ 3821 SE 22 PLACE City State ZIP Code FL 34471 **OCALA** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 700.00 0.00 700.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 02<sup>M</sup> ž014 0 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 700.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

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X	13a
	13b

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for each category of the **LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4377 NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary DAVID C KOLLER ★ General Mailing Address Other (specify)  $\blacktriangledown$ 3821 SE 22 PLACE City State ZIP Code FL 34471 **OCALA** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 280.00 0.00 280.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 02<sup>M</sup> ž014 0 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 280.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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**X** 13a

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Detailed Summary Page 13b Transaction ID: SC/10.4665 NAME OF COMMITTEE (In Full) KOLLER FOR CONGRESS LLC LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary DAVID C KOLLER General Mailing Address Other (specify)  $\blacktriangledown$ 3821 SE 22 PLACE City State ZIP Code FL 34471 **OCALA** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10300.00 0.00 10300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 <sup>M</sup> 05<sup>M</sup> ž014 0 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10300.00 TOTALS This Period (last page in this line only) ...... 12280.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 25 OF
FOR LINE NUMBER:
(check only one)

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X	10

25

NAME OF COMMITTEE (In Full)

KOLLER FOR CONGR	ESS LLC		
A. Full Name (Last, First, Middle Initial) of Debtor DAVID C KOLLER	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  DAVID C KOLLER		
Mailing Address 3821 SE 22 PLACE			
City State OCALA	Zip Code FL 34471		
Outstanding Balance Beginning This Period 13600.00		Transaction ID : SD10.4290	
Amount Incurred This Period  0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period	
B. Full Name (Last, First, Middle Initial) of Debtor DAVID C KOLLER  Mailing Address 3821 SE 22 PLACE	or Creditor	Nature of Debt (Purpose): Towards Consultation	
3021 GE 221 ENGE	7:- Oada		
City State OCALA	Zip Code FL 34471		
Outstanding Balance Beginning This Period 5778.17		Transaction ID : SD10.4310	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00		
C. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor	Nature of Debt (Purpose):	
Mailing Address			
City	State Zip Code		
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1) SUBTOTALS This Period This Page (optional)		19378.17	
2) TOTALS This Period (last page this line number	only)	19378.17	
3) TOTAL OUTSTANDING LOANS from Schedule (	C (last page only)	12280.00	
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	31658.17	